

## **RESERVE POLICY & INTEGRATION (M10)**

### MAY 2020

WHAT'S INSIDE?	
Operations1	
Education & Training2	
Finance3	
Manpower3	
IRT Program3	
M10 Recall Positions3	
AMSUS3	
IT Corner4	
Senior Enlisted Notes4	
Selection Board Notes5	
Navy Medicine Naming	
Conventions5	

# OPERATIONS CDR Skinner/LT Womack

Recently, the Surgeon General wrote an email praising Navy Medicine efforts in the COVID-19

## "WE ARE FLAT OUT MAKING A DIFFERENCE!"

-RADM BRUCE GILLINGHAM, SURGEON GENERAL, U.S. NAVY

fight. "Because of YOUR significant, selfless and incredible efforts, we are having dramatic effects on mitigating the spread of this disease, protecting our Navy and Marine Corps team, and maintaining mission readiness. Together, WE have deployed the largest force of medical personnel since Operations DESERT SHIELD/DESERT

STORM, nearly 30 years ago. WE have deployed almost 4,000 Sailors on our hospital ships and in civilian medical facilities around the country, working shoulder-to-shoulder with local health care providers during this crisis, and we remain committed to sustaining this effort for as long as our nation requires. WE are flat out making a difference!"

Navy Reserve Medicine has mobilized nearly 1,300 service members to the COVID-19 fight to date, many of which are still deployed. The incredible response from the Reserve Medicine community was nothing short of impressive. Some members deployed within 48 hours of notification. This exemplifies what it means to be ready! Looking forward, IA mobilizations continue. We always seek to source IA requirements with volunteers first. Be on the look-out for Gov.delivery and Zip-Serve advertisements for upcoming mobilizations to Cuba, Afghanistan and others. COVID-19 mobilizations have impacted our inventory of some specialties and volunteers are needed now more than ever! Interested volunteers, please send an email to

<u>usn.ncr.bumedfchva.mbx.reserve-</u> operations@mail.mil.

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### **EDUCATION & TRAINING**

### The "Magical Place" - LCDR Bates/HM1 El Gbouri

Shipmates, thank you for your diligent efforts towards readiness! We must continue to train to mission requirements to ensure action towards "Medical Power for Naval Superiority." Continue to align priorities to programs and resources to include an effective mix of people, training and documentation. Why? The answer is simple: we want to get capabilities to the warfighter faster and continue to build a lethal, medical force.

Stakeholders, please provide an update to your Q4 FY20 requirements. The Training, Events and Exercise Plans (TEEP) helps estimate costs for each platform. The NRM TEEP Conference will be held virtually on 13-14 June. We are

working to utilize the TEAMS platform to conduct this meeting. COs/XOs/TOs/OPSOs should be working to establish their TEAMS account - information can be found on the CNRFC N7 webpage. M10 will send out additional conference information in the next week. FY21 training, exercises, and events are needed to populate the TEEP calendar for merging with the Active Component. EMFs will be required to review and populate Fleet Response Training Plans (FRTPs) in the Readiness Cost and Reporting Program (RCRP) system.

Here are a few tips to get to the "magical place:"

Plan, plan, plan. Identify individual and unit training gaps, and prioritize to fill those gaps.

Prioritize our enlisted members for Tactical Combat Casualty Care (TCCC) course completion.

Prioritize members filling critical war time specialties (i.e. surgical and respiratory therapy technicians, critical care nurses, surgeons) to complete required phased trauma trainings to promote medical readiness skills.

Do away with meaningless routines, and set SMART goals (specific, measurable, attainable, realistic, time-bound). Dollars are finite. It's all about organizational discipline, and you can do it!

Ensure phased trauma training completions are always documented in FLTMPS.



### **FINANCE**

#### Mr. Jim Clearwood

Orders Liquidation: Following your return from executing NROWS orders, Reserve members need to liquidate their claims in DTS within 5 days of return. This is especially important now, since orders liquidation often results in the return of funds to BUMED. Due to COVID-19 requirements, BUMED has executed more ADT-SPEC in the past 4 weeks than we were provided for the entire fiscal year! As a result, we have limited ADT available to support mission essential travel. The timely liquidation of orders will provide the additional funding necessary for BUMED to continue to support mission essential travel and better prepare us to resume operations when the current travel restrictions are lifted.

NROWS Orders Requests: Orders are not official until NROWS orders are fund approved by BUMED. Once fund approved, they will display in NROWS as "ORIGINAL" orders. NEVER travel without having obtained these original orders. When a member completes an NROWS orders request and routes that request for Unit Approval, it's only a request for orders. BUMED Fund Approval is the final step in the approval process.

As soon as you receive a notification to complete an NROWS orders request, complete and route it to your Unit Approver. **Do not wait!** Until orders are approved, you do not have authorization to travel - NROWS orders requests SAVED and ROUTED to the NOSC is the only way to obtain approved orders. If you wait, BUMED loses money, and you will not go anywhere. More importantly, unit readiness training may not get completed. **It will not just be your unit that is affected!** 

#### **Important Dates to Remember:**

**31 May 2020** - All planned AT Requirements are due in NROWS.

**01 Jun 2020** – All SELRES must have their NROWS orders requests routed to the NOSC by June 1st to ensure they will be able to execute an AT.

**10 Jul 2020** – FY21 BUMED Operational Support Plan (OSPLAN) inputs (i.e., NROWS FY21 requirements built) due.

**31 Aug 2020** – All fourth quarter Additional Drills must be scheduled and approved in EDM.

### **MANPOWER**

### LT Johnson/HMC Sevilleja

Due to COVID-19, there are a number of changes to the upcoming FY21 APPLY cycle:

Revised deadline for billet updates (comments,

descriptions, etc.): 7 July

Revised application dates: 13 July - 24 Aug Revised APPLY Board dates: 19 - 30 October

\*Tentative\*

# IRT PROGRAM LCDR Gangler

As of 07MAY, three of the four FY20 Innovative Readiness Training (IRT) exercises involving Navy Reserve Medicine personnel were canceled due to COVID-19. The last IRT, Valley Healthcare, is still planned for an August 2020 execution. We will soon begin planning FY21 IRTs.

### M10 RECALL POSITIONS

Manpower Analyst (O3) - due 01JUN20 Strategic Plans & Operations Officer (O4-O5) - due 01JUN20

NMRTC Jacksonville OSO (O4) – due 01JUN20
\*Application packages must include: Letter of Intent, military/civilian resume, last three Fitness Reports, PRIMS printout, and CO endorsement (may not be from a Detachment OIC) in one combined PDF. Packages should be sent to Mr. Jay Delfoe (PERS-92), joseph.delfoe@navy.mil.

### **AMSUS**

Save the date for the 129th AMSUS Annual Meet to be held on 6-10 December 2020 at the Gaylord National Resort & Convention Center in National Harbor Maryland! This year's theme "Federal Health: A Global Vision Beginning in Your Community" continues to support federal health professionals and honors the legacy of federal medicine's tremendous

impact in advancing and improving health for all Americans and international coalition partners. A data call is forthcoming. It is my pleasure to serve as your Navy Liaison for this endeavor, and feel free contact me at <a href="mailto:patricia.l.skinner4.mil@mail.mil">patricia.l.skinner4.mil@mail.mil</a> for any needs.

### **129th AMSUS Annual Meeting**

Federal Health: A Global Vision Beginning in Your Community

6-10 December 2020

Over 2,000 influential healthcare professionals and leaders attend the AMSUS Annual Meeting

Gaylord National Resort & Convention Center 201 Waterfront Street, National Harbor, Maryland



**Important AMSUS Deadlines**: AMSUS lecture abstracts and AMSUS annual award\* nominations due 17 JUL 2020

AMSUS poster abstracts due 3 AUG 2020

\*Award Recipients will be announced late SEP 2020. For additional details, and information, check out: <a href="https://www.amsus.org">www.amsus.org</a>.

# IT CORNER HM1 EL Gbouri

#### How to send encrypted emails to any .mil email:

Remember the box message that says: "You can't send an encrypted email to this recipient," and gives you the option to send it unencrypted? The following methods will help you avoid sending unencrypted messages: Find the member in the DoD website below, download their certificates, and save them. You will then be able to send encrypted messages anytime. For more details, go to the M10 Max.gov and check out this link:

file:///C:/Users/samel/Downloads/How%20to%20Send %20Encrypted%20Emails%20to%20a%20DoD%20Email.pdf

First, try to send encrypted. If you get an error message, follow one of the following methods:

METHOD 1: 1. Send a test signed email to the email you are trying to send an encrypted email to. 2. Ask the recipient to respond to your email by also sending a signed email. 3. This creates a trusted partnership between the two accounts and should allow you to exchange encrypted email. 4. If this does not work or you couldn't get the recipient to reply with a signed email, try method 2.

**METHOD 2:** To send encrypted emails to a POC/Recipient e-mail, proceed with the following steps: **a.** Go to this website to find the recipient certificate and download and install it:

#### https://dod411.gds.disa.mil/

- **b.** Copy and paste the Recipient email into the email box.
- **c.** Click on the Last Name you found, and you will get the following screen:



**4.** Once you click on Download Certificate, you will be prompted to run it. Once done, the certificate will be installed on your computer, which will allow you to send encrypted emails to this email via Outlook.

In the next newsletter, I will show you how to encrypt from OWA webmail.

P.S. The method 2 process is valid to send encrypted emails to any DOD E-mail. Protecting our data is only a few clicks away. Please get into the habit of strengthening our information security.

# SENIOR ENLISTED NOTES HMCS Sheppard

In the midst of the COVID-19 pandemic, many NAVADMINs were released. Please ensure that you

Check out M10's Max.gov page at:

are keeping yourself safe and adhering to social distancing of 6 feet when necessary. Read the NAVADMINs and keep yourself in the loop on all the updates that are happening in the fleet. NAVADMIN 062/20, 068/20, 071/20, 083/20, 088/20, 092/20

Ensure you are adhering to applicable telework directives that were issued during this unique situation. Ensure you take precautions on the utilization of PII when teleworking.

For more information, please contact HMCS Derek Sheppard at (703) 681-9202 or E-mail: derek.w.sheppard.mil@mail.mil.

### SELECTION BOARD NOTES

All hands should familiarize themselves with the following hyperlinked document that announces the recommencement of selection boards and the revised schedule.

NAVADMIN 144/20: Recommencement of Selection

**Boards and Revised Schedule** 

# NAVY MEDICINE NAMING CONVENTIONS

Since Navy Medicine's regions changed names in December, there is some noticeable confusion in acceptable naming conventions when referring to the Command name in its various forms. To clear up any confusion, below is a list of acceptable nomenclature:

- Naval Medical Forces Atlantic/Naval Medical Forces Pacific/Naval Medical Forces Support Command (Full proper name)
- 2. NAVMEDFORLANT/NAVMEDFORPAC/ NAVMEDFORSUPCOM (Official message traffic)
- **3.** NMFL/NMFP/NMFSC Alternate short title that may be used when you are trying to save space when writing. (\*\*Please note\*\* NMFA did not make the cut and should no longer be used as a short title when referring to NAVMEDFORLANT.)